PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	Application Number	09/674,819								
TRANSMITTAL	Filing Date	November 6, 2000								
FORM	First Named Inventor	Akira Aomatsu, et al.								
1 3141	Art Unit	1639								
	Examiner Name	My Chau T. Tran								
(to be used for all correspondence after initial	filing) Attorney Docket Number									
Total Number of Pages in This Submission	Talestroy Decider Hambon	PC17354 (5774-01-MJA)								
ENCLOSURES (Check all that apply)										
Fee Transmittal Form Fee Attached	Drawing(s) Licensing-related Papers	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences								
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Appeal Brief w/ Exhibits								
	TURE OF APPLICANT, ATTOR	RNEY, OR AGENT								
Firm Name Pfizer Inc.										
Signature										
Printed name										
Paul M. Misiak										
Date May 4	2007 R	eg. No. 58,310								
CERTIFICATE OF TRANSMISSION/MAILING										
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Typed or printed name Linda A. Zerby		Date May 4 2007								

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Effect	tive on 12/08/2	2004.		Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 09/674,819							
FEE TRANSMITTAL			Filing Date November 6, 2000							
For FY 2007			First Named Inventor Akira Aomatsu, et al.							
Applicant claims small entity status. See 27 CED 1.27			Examiner Name My Chau T. Tran							
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1639						
TOTAL AMOUNT OF PAYMENT (\$) 500.00				Attorney Docke	Attorney Docket No. PC17354 (5774-01-MJA)					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 16-1445 Deposit Account Name: Pfizer Inc.										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments										
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	information and authorization on PTO-2038.									
FEE CALCULATION						***************************************			per consensus co	
1. BASIC FILING, SEAI	R CH, AND I FILING I			CH FEES	FXAM	INATION	FEES			
Application Type	<u>S</u>	Small Entity		Small Entity		Small E	Entity	Face Dais	I (#\	
<u>Application Type</u> Utility	Fee (\$) 300		ee (\$)		Fee (Fees Paid	<u>ı (\$)</u>	
· ·			00	250	200	100				
Design	200		.00	50	130	65				
Plant	200		00	150	160	80				
Reissue	300		00	250	600	300			<u> </u>	
Provisional	200	100	0	0	0	0				
Fee Description	2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)									
Each claim over 20 (Each claim over 20 (including Reissues) 50 25									
Each independent cla		including Reissues))				00	100		
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Pai				Daid (ft)		-	60	180	_	
- 20 or HP =	Extra Clain		ree	Paid (\$)				ependent Claim Fee Paid (_	
HP = highest number of tota	l claims paid fo	r, if greater than 20.				<u> </u>	e (\$)	ree Palu (<u> 21</u>	
Indep. Claims	Extra Clain	ns Fee (\$)		Paid (\$)						
3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer										
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50										
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)										
100 = / 50 = (round up to a whole number) x =										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees	Paid (\$)		
Other (e.g., late filing surcharge): 37 CFR § 41.20(b)(2) 500.00										
SUBMITTED BY										
Signature Registration No. (Attorney/Agent) 58,310					ī	Telephone 734-622-1435				
Name (Print/Type) Paul M. Misiak				(Montey/Agent)	*			MAY 4/ 20	***	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.